Application or Docket Number

PATENT APPLICATION . . E DETERMINATION RECORD

Effective October 1, 2001

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10-	03/,	Z	49

TOTAL CLAIMS	CLAIMS AS FILED - PART I						01111			, , ,	-/	
TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS J minus 20= * 5 NUMER PRESENT *If the difference in column 1 is less than zero, enter "0" in column 2 *If the difference in column 1 is less than zero, enter "0" in column 2 *CLAIMS AS AMENDED - PART II (Column 1) *Column 2) *CLAIMS AS AMENDED - PART II (Column 3) *CLAIMS AS AMENDED - PART II (Column 4) *If the difference in column 1 is less than zero, enter "0" in column 2 *CLAIMS AS AMENDED - PART II (Column 5) *CLAIMS AS AMENDED - PART II (Column 6) *CLAIMS AS AMENDED - PART II (Column 7) *TOTAL JJJ OR *TO							mn 2)		NTITY	OB		
FOR	TOTAL CLAIMS								FFF	7 7		
TOTAL CHARGEABLE CLAIMS	FOR NUMBER FILED			NUMB	ER EXTRA		378.55	OR		- & Q /)		
MULTIPLE DEPENDENT CLAIM PRESENT	TOTAL CHARGEABLE CLAIMS 25 minus 20=				nus 20=	* 5		X\$ 9=	45	1	X\$18=	90
* If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 3) * Minus * FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total * Minus * Minus * HIGHEST * PRESENT * PRESENT * PRESENT * FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * Independent * Minus * Minu	 			L/	nus 3 =	* /		X42=			X84=	less
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(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Total * Independent * Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."		FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		X12=		OR	704-	
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